

JCY 193

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		04/14/01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>[Signature]</i>	93221	5/10/01
RESPONSE FORMALITY REVIEW			06-08-01

# INDEX OF CLAIMS

✓ ..... Rejected  
 N ..... Non-elected  
 - ..... Allowed  
 I ..... Interference  
 (Through numeral) Canceled  
 A ..... Appeal  
 - ..... Restricted  
 O ..... Objected

09/936525

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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